

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>	<i>1st</i>	<i>45</i>	
<b>FORMALITY REVIEW</b>		<i>571</i>	<i>3/12/01</i>
<b>RESPONSE FORMALITY REVIEW</b>	<i>in</i>	<i>905</i>	<i>6/16/01</i>

**INDEX OF CLAIMS**

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)...	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	
1	<i>2/26/01</i>
2	<i>✓</i>
3	<i>✓</i>
4	<i>✓</i>
5	<i>✓</i>
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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Best Available Copy

3/19/01